

FEE TRANSMITTAL		Complete if Known	
		Application Number	10/577,177-Conf. #4085
		Filing Date	February 5, 2007
		First Named Inventor	Alejandro Balazs
		Examiner Name	M. A. Belyavskiy
		Art Unit	1644
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	C1233.70001US01
TOTAL AMOUNT OF PAYMENT		(\$)	200.00

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account            Deposit Account Number: <u>23/2825</u> Deposit Account Name: <u>Wolf, Greenfield &amp; Sacks, P.C.</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>	

FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)		
Utility	380	190	620	310	250	125		
Design	250	125	120	60	160	80		
Plant	250	125	380	190	200	100		
Reissue	380	190	620	310	750	375		
Provisional	250	125	0	0	0	0		
2. EXCESS CLAIM FEES								
						Small Entity		
						Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)						60	30	
Each independent claim over 3 (including Reissues)						250	125	
Multiple dependent claims						450	225	
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
- 20 or HP		x	=		<u>Fee (\$)</u>			<u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if greater than 20.								
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
- 3 or HP =		x	=					
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
- 100 =	/50 =	(round up to a whole number) x	=					
4. OTHER FEE(S)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): <u>1455 Filing an application for patent term adjustment</u>						200.00		

SUBMITTED BY			
Signature	/Minita G. Holloway/	Registration No. (Attorney/Agent)	67,594    Telephone    617.646.8000
Name (Print/Type)	Minita G. Holloway	Date	November 17, 2011

Certificate of Electronic Filing Under 37 CFR 1.8	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with 37 CFR § 1.6(a)(4).	
Dated: November 17, 2011	Electronic Signature for Paula J. Bramwell: /Paula J. Bramwell/